

Minutes
Mental Health Services of Catawba County
Board of Directors
Thursday, August 16, 2007
7:00 P.M.

The Mental Health Services of Catawba County Board of Directors met on this date in the first floor conference room at First Plaza.

Members of the Board present included: Ray Von Beatty, John Dayberry, Danny Graves, Ronald Kendrick, Crystal Leathers, Dr. Tom McKean, Charles Phillips, Maynard Taylor, Harold Setzer and David Isenhower. Excused and/or absent for other equivalent circumstances were Joe Beaman, Jr., David Boone, Lynn Lail, Susan Anderson, and Dr. Robert Yapundich. Mental Health staff present included John Hardy, Melanie Britt and Judy Dahlstrom.

A quorum was present.

The meeting agenda was mailed to the Board and media on approximately August 10, 2007.

There were no representatives of the media present. Board Chair Dr. Tom McKean called the meeting to order at 7:10 P.M.

Invocation

Dr. Tom McKean led the invocation.

Minutes

The minutes of the July 19, 2007 Board of Directors Meeting were presented.

Maynard Taylor made a motion that the minutes of the July 19, 2007 Board of Directors Meeting be accepted as presented. John Dayberry seconded the motion.

There was no discussion, and it was voted to accept the minutes of the July 19, 2007 Board of Directors Meeting as presented.

Citizen Comments

There were no citizen comments.

Commissioner Comments

Lynn Lail, Catawba County Commissioner, was not in attendance at the meeting.

Maynard Taylor, Burke County Commissioner, gave brief highlights of the most recent Burke County Board of Commissioners meeting. He stated that it had lasted four hours, during which several items were addressed as follows: the Board of Commissioners voted to participate in the 4-county effort creating Western Piedmont Regional Transport; they approved the financing of an emergency training center at Western Piedmont Community College; and they heard and considered several zoning requests for the area. Ronald Kendrick questioned how transit opportunities were addressed for indigent citizens, particularly if there were grant funds that would support indigent transit. Commissioner Taylor stated that systems were moving to regionalize services for more efficiency, prioritizing transit availability on major thoroughfares first, and that because this is a multi-county project, the grant money availability could potentially double which would address some of the indigent transit issues. John Hardy stated that several public agencies made vouchers and bus passes available for this need. Mr. Kendrick emphasized his recommendation for support of indigent transit opportunities.

Director's Report

1. A counter-proposal of settlement was offered this week on the Life Skills project, which may be accepted and move the county one step closer to final settlement.
2. An article was published in the *Charlotte Observer* today centered around law officers waiting for hours in hospital EDs with mental health consumers needing psychiatric admission. This actually is a supply and demand issue with psychiatric bed capacity statewide rather than solely an issue of effects on law enforcement officers. Broughton is working under the new system of using a "wait-list" status if they are at 110% capacity, which forces local EDs to manage more consumers for longer periods of time if they cannot be admitted on-site. There are broad systems issues about accepting/ denying admission to consumers and how those decisions are made and consequences played out within the community. In some state facilities they have created 48-hour holding units which allows a clinically contained environment for evaluation to occur and determine admission need. Data shows that approximately 40% of Broughton admissions are released within 3 days, so a holding unit may provide a means of care while diverting inappropriate admissions. The Division has supported such efforts in other facilities, so this may be explored locally. There are several meetings scheduled within the next two weeks to discuss options of addressing this community need.
3. A major training was held with the Catawba County providers on July 25, 2007, similar to the one held with Burke County providers. Basic business practices were discussed, along with plans of moving toward more web-based processes rather than paper-based. Providers were presented with the option of connectivity to allow auto-auths and claims entry through our MCO system. However, since that time we have had a presentation from a local company, Biz Technology, whose function is designing software systems to improve healthcare organizations' efficiency. Their program requires only internet access from providers for access, and for the LME, there are multiple potential benefits

including the “scrubbing” of information prior to its processing (i.e., if there is missing or incorrect data submitted by a provider, that error is automatically sent back to them for correction before entering the LME system). This would free up our manpower resources to focus on more process-oriented tasks rather than data entry and cleanup. We are exploring the cost of pursuing the implementation of this system.

4. Work with the combined CFAC of Burke and Catawba continues to progress positively.
5. Office space in Burke should be completed and ready for occupancy by the first or second week in September.
6. Tomorrow there will be a transfer of 11 or 12 wards from Burke County to guardianship by Catawba County.
7. There continue to be renovations to the First Plaza site, and hiring of positions.
8. An invitation was issued for Sunday morning at 8:00 A.M. when the new jail will be populated. The jail project is nearing completion as inmates are transferred to the new facility, and the old jail is painted and readied for the female inmates who will be housed there.
9. The State has approved its budget for this fiscal year, complete with several new provisions that were addressed at the latest Area Directors meeting so that implications can be understood and addressed. There were some financial shortfalls, so some money was pulled from the regular pots of service dollars to cover the gaps. Also, in general at the state level, there is a move and emphasis on wider regionalization efforts, crisis services, and tracking of processes/ outcomes.

At the close of the Director’s report, Ron Kendrick discussed concern about a recent newspaper article that cited an auto accident involving “mental health patients” and listing them by name. He questioned the sensitivity of the press in their presentation, and the other Board members responded supportively in affirming their questions of confidentiality and, more broadly, working against the stigma still attached to MH/DD/SA consumers.

Legislative Update

Judy Dahlstrom distributed a handout listing some of the items included in the approved State budget. She noted the following highlights:

- 300 additional slots for CAP-MR/DD consumers
- 13.7 million one-time recurring funds for LMEs to implement crisis plans they initiated last FY
- a realignment of funds as State hospitals are closing and new facilities are opened. It was clarified that a reduction in funding to Black Mountain

ADACT was simply a postponement of funding for additional beds to be created at a later date

- MH should net about \$1.1million in additional funds for 07/08, and approximately \$8 million for 08/09. Compared against the \$1.2 Billion dollar MH budget, the increase is small this year.

John Hardy stated that though the budget has been approved, the process of creating a “certified budget” has not been completed. Once that’s done, the Division has 45 days to issue allocation letters to the area programs.

Further discussion centered around NC’s participation in Medicaid, with plans to phase out over the next 5 years. Individual counties must choose their method/ timing of Medicaid relief and it will go out to voter referendum. John Hardy stated that Catawba County anticipates maybe saving \$500,000 this year, with incremental increases over the next few years. Commissioner Taylor presented several proposals by Burke County.

Action Items

Appointment of CFAC members

Judy Dahlstrom, CFAC liaison, presented a list of 10 members recommended for CFAC appointment. As there will be a total of 12 voting members, two vacant slots need to be filled with SA consumers or family members to have equal disability representation in the committee, per legislative statute. Recruitment will continue to fill those slots. CFAC will have co-chairs, one from Catawba and one from Burke. When Catawba had a single-county CFAC, membership stipends were paid; the new joint CFAC has voted that these stipends be voluntary. CFAC meetings will be held in the Community House in Morganton, as that has served as the best location for ease in membership attendance. Terms of current CFAC members will be through this interim period, with legislatively required terms and limits put into effect as the new entity is formed.

David Isenhower made the motion to accept the recommended CFAC membership list as presented, with recruitment to fill the final two spots. The motion was seconded by Ronald Kendrick, and passed by vote of the Board.

Other

Membership of the Integration Committee needs to be completed by the Burke County Board of Commissioners appointing 2 members. Catawba County has appointed its members. The first meeting will be held from 5:00 p.m.-7:00 p.m. on Wednesday, September 5, 2007 at First Plaza, either in the first floor conference room or in one of the fifth floor conference rooms. A final meeting notification will be sent out prior to the date, including a task list to be completed by the committee. Meetings will be held alternately in Burke and Catawba Counties.

Information Items

Chair Tom McKean gave an overview of the information items included in the Board packets. Additionally, he distributed a handout to be used in completing the Area Director annual evaluation that is due. The new evaluation tool is more concise than forms used in previous years. An electronic copy of the areas for consideration/evaluation will be e-mailed to all Board members to provide input. The evaluation must be returned to Janice Cornett by August 31, 2007. This will be brought back to the committee for action in the next meeting of the Mental Health Board of Directors on September 10, 2007 at First Plaza.

There being no further business, the meeting was adjourned at 8:10 P.M.

Respectfully submitted,

Melanie Britt, Quality Management